

PATENT

**IN THE UNITED STATES PATENT AND TRADEMARK OFFICE**

**Applicant(s):** Noriaki Oda et al.

**Docket:** 12562A

**Serial No.:** 09/863,737

**Examiner:** Monica Lewis

**Filed:** May 23, 2001

**Group Art Unit:** 2822

**For:** SEMICONDUCTOR DEVICE  
AND METHOD OF MANUFACTURING  
THE SAME

**Dated:** December 19, 2003

Mail Stop Non-Fee Amendment  
Commissioner for Patents  
Alexandria, VA 22313

**RESPONSE UNDER 37 C.F.R. § 1.115**

Sir:

In response to the Office Action dated September 25, 2003, applicants submit the following reply.

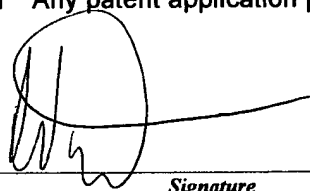
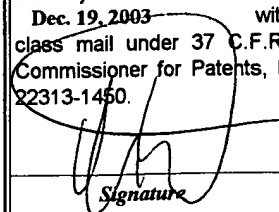
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**CERTIFICATE OF MAILING UNDER 37 C.F.R. §1.8(a)**

I hereby certify that this correspondence is being deposited with the United States Postal Service as first class mail in an envelope addressed to: Commissioner for Patents, Alexandria VA 22313 on December 19, 2003.

Dated: December 19, 2003

Richard J. Danyko

<b>AMENDMENT TRANSMITTAL LETTER (Large Entity)</b>				Docket No. <b>12562A</b>	
Applicant(s): <b>Noriaki ODA, et al.</b>					
Serial No. <b>09/863,737</b>	Filing Date <b>May 23, 2001</b>	Examiner <b>Monica Lewis</b>	Group Art Unit <b>2822</b>		
Invention: <b>SEMICONDUCTOR DEVICE AND METHOD OF MANUFACTURING THE SAME</b>					
<u>TO THE COMMISSIONER FOR PATENTS:</u>					
Transmitted herewith is an amendment in the above-identified application.					
The fee has been calculated and is transmitted as shown below.					
<b>CLAIMS AS AMENDED</b>					
	CLAIMS REMAINING AFTER AMENDMENT	HIGHEST # PREV. PAID FOR	NUMBER EXTRA CLAIMS PRESENT	RATE	ADDITIONAL FEE
TOTAL CLAIMS	12 -	20 =	0 x	\$18.00	\$0.00
INDEP. CLAIMS	2 -	3 =	0 x	\$86.00	\$0.00
Multiple Dependent Claims (check if applicable) <input type="checkbox"/>					\$0.00
<b>TOTAL ADDITIONAL FEE FOR THIS AMENDMENT</b>					<b>\$0.00</b>
<div style="display: flex; justify-content: space-between;"> <div> <input checked="" type="checkbox"/> No additional fee is required for amendment.  <input type="checkbox"/> Please charge Deposit Account No. _____ in the amount of _____  <input type="checkbox"/> A check in the amount of _____ to cover the filing fee is enclosed.  <input checked="" type="checkbox"/> The Director is hereby authorized to charge payment of the following fees associated with this communication or credit any overpayment to Deposit Account No. <b>19-1013/SSMP</b>  <input checked="" type="checkbox"/> Any additional filing fees required under 37 C.F.R. 1.16.  <input checked="" type="checkbox"/> Any patent application processing fees under 37 CFR 1.17. </div> <div style="text-align: right;"> <b>Dated: December 19, 2003</b> </div> </div> <div style="margin-top: 20px;">  <div style="margin-left: 100px;"> <b>Richard J. Danyko</b>  Registration No. 33,672  <b>SCULLY, SCOTT, MURPHY &amp; PRESSER</b>  400 Garden City Plaza  Garden City, New York 11530  (516) 742-4343   RJD/ej </div> </div>					
<div style="border: 1px solid black; padding: 5px;"> I certify that this document and fee is being deposited on <b>Dec. 19, 2003</b> with the U.S. Postal Service as first class mail under 37 C.F.R. 1.8 and is addressed to the Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.    <div style="text-align: right;"> <b>Richard J. Danyko</b>  Typed or Printed Name </div> </div>					